

ARIZONA CORPORATION COMMISSION
UTILITIES DIVISION

ANNUAL REPORT MAILING LABEL – MAKE CHANGES AS NECESSARY

W-03476A
BN Leasing Corporation
d/b/a Aubrey Water Company
P.O. Box 961050
Ft Worth, TX 76161

RECEIVED
MAY 16 2011
ARIZONA CORPORATION COMMISSION
UTILITIES DIVISION

ANNUAL REPORT
Water

FOR YEAR ENDING

12	31	2010
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FOR COMMISSION USE

ANN 04	10
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5-16-11

COMPANY INFORMATION

Company Name (Business Name) BN Leasing d/b/a Aubrey Water Company

Mailing Address 2500 Lou Menk Drive, AOB-3

(Street)

Fort Worth

(City)

Texas

(State)

76131

(Zip)

817-352-6461

Telephone No. (Include Area Code)

817-352-7797

Fax No. (Include Area Code)

817-313-4785

Cell No. (Include Area Code)

Email Address blaine.bilderback@bnsf.com

Local Office Mailing Address P.O. Box 85160

(Street)

Tucson

(City)

AZ

(State)

85754

(Zip)

520-623-5172

Local Office Telephone No. (Include Area Code)

520-792-0377

Fax No. (Include Area Code)

Cell No. (Include Area Code)

Email Address swumgmt@aol.com

MANAGEMENT INFORMATION

☐ **Management Contact:** Blaine Bilderback Director Corporate Facilities

(Name)

(Title)

2500 Lou Menk Drive AOB-3

(Street)

Ft Worth

(City)

Texas

(State)

76131

(Zip)

817-352-6461

Telephone No. (Include Area Code)

817-352-7797

Fax No. (Include Area Code)

817-313-4785

Cell No. (Include Area Code)

Email Address blaine.bilderback@bnsf.com

On Site Manager: John Kennedy

(Name)

P.O. Box 416

(Street)

Seligman

(City)

AZ

(State)

86337

(Zip)

928-422-3242

Telephone No. (Include Area Code)

928-422-3242

Fax No. (Include Area Code)

Cell No. (Include Area Code)

Email Address kennedy@tabletoptelephone.com

Statutory Agent: <u>CT Corporation</u>			
(Name)			
<u>3225 N. Central Ave</u>	<u>Phoenix</u>	<u>AZ</u>	<u>85012</u>
(Street)	(City)	(State)	(Zip)
<u>602-277-4792</u>	<u></u>	<u></u>	<u></u>
Telephone No. (Include Area Code)	Fax No. (Include Area Code)	Cell No. (Include Area Code)	
Attorney: <u>Jeffery Crockett, Snell & Wilmer</u>			
(Name)			
<u>One Arizona Center</u>	<u>Phoenix</u>	<u>AZ</u>	<u>85004</u>
(Street)	(City)	(State)	(Zip)
<u>602-382-6234</u>	<u>602-382-6070</u>	<u></u>	<u></u>
Telephone No. (Include Area Code)	Fax No. (Include Area Code)	Cell No. (Include Area Code)	
Email Address <u></u>			

OWNERSHIP INFORMATION

Check the following box that applies to your company:

- | | |
|---|--|
| <input type="checkbox"/> Sole Proprietor (S) | <input checked="" type="checkbox"/> C Corporation (C) (Other than Association/Co-op) |
| <input type="checkbox"/> Partnership (P) | <input type="checkbox"/> Subchapter S Corporation (Z) |
| <input type="checkbox"/> Bankruptcy (B) | <input type="checkbox"/> Association/Co-op (A) |
| <input type="checkbox"/> Receivership (R) | <input type="checkbox"/> Limited Liability Company |
| <input type="checkbox"/> Other (Describe) _____ | |

COUNTIES SERVED

Check the box below for the county/ies in which you are certificated to provide service:

- | | | |
|-------------------------------------|---|-----------------------------------|
| <input type="checkbox"/> APACHE | <input type="checkbox"/> COCHISE | <input type="checkbox"/> COCONINO |
| <input type="checkbox"/> GILA | <input type="checkbox"/> GRAHAM | <input type="checkbox"/> GREENLEE |
| <input type="checkbox"/> LA PAZ | <input type="checkbox"/> MARICOPA | <input type="checkbox"/> MOHAVE |
| <input type="checkbox"/> NAVAJO | <input type="checkbox"/> PIMA | <input type="checkbox"/> PINAL |
| <input type="checkbox"/> SANTA CRUZ | <input checked="" type="checkbox"/> YAVAPAI | <input type="checkbox"/> YUMA |
| <input type="checkbox"/> STATEWIDE | | |

UTILITY PLANT IN SERVICE

Acct. No.	DESCRIPTION	Original Cost (OC)	Accumulated Depreciation (AD)	O.C.L.D. (OC less AD)
301	Organization			
302	Franchises			
303	Land and Land Rights			
304	Structures and Improvements	23,793	9,990	13,803
307	Wells and Springs	104,563	42,611	61,952
311	Pumping Equipment	1,598,961	127,471	1,471,490
320	Water Treatment Equipment	1,055	443	612
330	Distribution Reservoirs and Standpipes	20,605	5,516	15,089
331	Transmission and Distribution Mains	9,848	943	8,905
333	Services	8,332	1,220	7,112
334	Meters and Meter Installations	10,936	6,395	4,541
335	Hydrants	1,872	27	1,845
336	Backflow Prevention Devices			
339	Other Plant and Misc. Equipment			
340	Office Furniture and Equipment			
341	Transportation Equipment			
343	Tools, Shop and Garage Equipment	2,906	249	2,657
344	Laboratory Equipment			
345	Power Operated Equipment			
346	Communication Equipment			
347	Miscellaneous Equipment			
348	Other Tangible Plant			
	TOTALS	1,782,871	194,865	1,588,006

This amount goes on the Balance Sheet Acct. No. 108



CALCULATION OF DEPRECIATION EXPENSE FOR CURRENT YEAR

Acct. No.	DESCRIPTION	Original Cost (1)	Depreciation Percentage (2)	Depreciation Expense (1x2)
301	Organization			
302	Franchises			
303	Land and Land Rights			
304	Structures and Improvements	23,793	3.33%	792
307	Wells and Springs	104,563	3.33%	3,482
311	Pumping Equipment	1,598,961	12.5%	102,208
320	Water Treatment Equipment	1,055	3.33%	35
330	Distribution Reservoirs and Standpipes	20,605	2.22%	457
331	Transmission and Distribution Mains	9,848	2.00%	87
333	Services	8,332	3.33%	241
334	Meters and Meter Installations	10,936	8.33%	478
335	Hydrants	1,872	2.00%	26
336	Backflow Prevention Devices			
339	Other Plant and Misc. Equipment			
340	Office Furniture and Equipment			
341	Transportation Equipment			
343	Tools, Shop and Garage Equipment	2,906	5.00%	145
344	Laboratory Equipment			
345	Power Operated Equipment			
346	Communication Equipment			
347	Miscellaneous Equipment			
348	Other Tangible Plant			
	TOTALS	1,782,871		107,951

This amount goes on the Comparative Statement of Income and Expense _____
 Acct. No. 403.

BALANCE SHEET

[illegible]

NOTE: The Assets on this page should be equal to **Total Liabilities and Capital** on the following page.

BALANCE SHEET (CONTINUED)

Acct. No.			BALANCE AT BEGINNING OF YEAR		BALANCE AT END OF YEAR
	LIABILITIES				
	CURRENT LIABILITES				
231	Accounts Payable	\$	1,904	\$	11,756
232	Notes Payable (Current Portion)				
234	Notes/Accounts Payable to Associated Companies		575,508		1,825,455
235	Customer Deposits		923		2,018
236	Accrued Taxes		2,310		711
237	Accrued Interest				
241	Miscellaneous Current and Accrued Liabilities				
	TOTAL CURRENT LIABILITIES	\$	580,645	\$	1,839,940
	LONG-TERM DEBT (Over 12 Months)				
224	Long-Term Notes and Bonds	\$		\$	
	DEFERRED CREDITS				
251	Unamortized Premium on Debt	\$		\$	
252	Advances in Aid of Construction				
255	Accumulated Deferred Investment Tax Credits				
271	Contributions in Aid of Construction		6,046		6,046
272	Less: Amortization of Contributions				
281	Accumulated Deferred Income Tax				
	TOTAL DEFERRED CREDITS	\$	6,046	\$	6,046
	TOTAL LIABILITIES	\$	586,691	\$	1,845,986
	CAPITAL ACCOUNTS				
201	Common Stock Issued	\$		\$	
211	Paid in Capital in Excess of Par Value				
215	Retained Earnings		(76,843)		(167,478)
218	Proprietary Capital (Sole Props and Partnerships)				
	TOTAL CAPITAL	\$	(76,843)	\$	(167,478)
	TOTAL LIABILITIES AND CAPITAL	\$	509,848	\$	1,678,508

COMPARATIVE STATEMENT OF INCOME AND EXPENSE

Acct. No.	OPERATING REVENUES	PRIOR YEAR	CURRENT YEAR
461	Metered Water Revenue	\$ 156,131	\$ 170,576
460	Unmetered Water Revenue	100	
474	Other Water Revenues	590	1,175
	TOTAL REVENUES	\$ 156,821	\$ 171,751
	OPERATING EXPENSES		
601	Salaries and Wages	\$	\$
610	Purchased Water		
615	Purchased Power	31,763	31,471
618	Chemicals		
620	Repairs and Maintenance	18,379	9,208
621	Office Supplies and Expense	3,869	3,881
630	Outside Services	84,859	90,489
635	Water Testing	2,004	2,620
641	Rents		
650	Transportation Expenses	5,629	7,797
657	Insurance – General Liability	3,044	2,941
659	Insurance - Health and Life		
666	Regulatory Commission Expense – Rate Case		
675	Miscellaneous Expense		
403	Depreciation Expense	15,607	107,951
408	Taxes Other Than Income	1,386	
408.11	Property Taxes	5,262	5,943
409	Income Tax		
	TOTAL OPERATING EXPENSES	\$ 171,802	\$ 262,301
	OPERATING INCOME/(LOSS)	\$ (14,981)	\$ (90,550)
	OTHER INCOME/(EXPENSE)		
419	Interest and Dividend Income	\$	\$
421	Non-Utility Income		
426	Miscellaneous Non-Utility Expenses		
427	Interest Expense	74	85
	TOTAL OTHER INCOME/(EXPENSE)	\$ 74	\$ 85
	NET INCOME/(LOSS)	\$ (15,055)	\$ (90,635)

SUPPLEMENTAL FINANCIAL DATA**Long-Term Debt**

	LOAN #1	LOAN #2	LOAN #3	LOAN #4
Date Issued				
Source of Loan				
ACC Decision No.				
Reason for Loan				
Dollar Amount Issued	\$	\$	\$	\$
Amount Outstanding	\$	\$	\$	\$
Date of Maturity				
Interest Rate	%	%	%	%
Current Year Interest	\$	\$	\$	\$
Current Year Principle	\$	\$	\$	\$

Meter Deposit Balance at Test Year End

\$ NONE

Meter Deposits Refunded During the Test Year

\$ NONE

COMPANY NAME Aubrey Water Company	
Name of System:	ADEQ Public Water System Number: 13-010

WATER COMPANY PLANT DESCRIPTION

WELLS

ADWR ID Number*	Pump Horsepower	Pump Yield (gpm)	Casing Depth (Feet)	Casing Diameter (Inches)	Meter Size (inches)	Year Drilled
55-627275	30	150	400	16	4	1940
55-627276	30	150	400	16	4	1940

* Arizona Department of Water Resources Identification Number

OTHER WATER SOURCES

Name or Description	Capacity (gpm)	Gallons Purchased or Obtained (in thousands)
N/A		

BOOSTER PUMPS		FIRE HYDRANTS	
Horsepower	Quantity	Quantity Standard	Quantity Other
25	2	22	
2	1		

STORAGE TANKS		PRESSURE TANKS	
Capacity	Quantity	Capacity	Quantity
280,000	1	3000	1

Note: If you are filing for more than one system, please provide separate sheets for each system.

COMPANY NAME Aubrey Water Company	
Name of System:	ADEQ Public Water System Number: 13-010

WATER COMPANY PLANT DESCRIPTION (CONTINUED)

MAINS		
Size (in inches)	Material	Length (in feet)
2	PVC	3560
3		
4	PVC	9600
5		
6	PVC	4800
8		
10		
12		
2	GALV	14580
6	CIP	15600

CUSTOMER METERS	
Size (in inches)	Quantity
5/8 X 3/4	286
3/4	1
1	9
1 1/2	8
2	12
Comp. 3	
Turbo 3	
Comp. 4	
Turbo 4	
Comp. 6	5
Turbo 6	

For the following three items, list the utility owned assets in each category for each system.

TREATMENT EQUIPMENT:

TWO CHLORINATORS -

STRUCTURES:

20 FOOT STORAGE CONTAINER, ONE PUMP HOUSE AND ONE STORAGE BUILDING -

OTHER:

-TRANSMISSION MAIN; CANYON MOUTH TO TOWN OF SELIGMAN (39,375 8" CIP) -

Note: If you are filing for more than one system, please provide separate sheets for each system.

COMPANY NAME: Aubrey Water Company	
Name of System:	ADEQ Public Water System Number: 13-010

WATER USE DATA SHEET BY MONTH FOR CALENDAR YEAR 2010

MONTH	NUMBER OF CUSTOMERS	GALLONS SOLD (Thousands)	GALLONS PUMPED (Thousands)	GALLONS PURCHASED (Thousands)
JANUARY	281	1,824	2,600	
FEBRUARY	283	1,866	2,406	
MARCH	285	2,473	3,111	
APRIL	282	2,875	3,570	
MAY	275	5,064	6,041	
JUNE	274	4,656	5,454	
JULY	280	4,819	5,753	
AUGUST	285	4,527	4,991	
SEPTEMBER	284	3,870	5,125	
OCTOBER	281	3,062	3,698	
NOVEMBER	282	2,109	2,887	
DECEMBER	283	2,882	3,197	
TOTALS →		40,027	48,833	

What is the level of arsenic for each well on your system? 0.004 mg/l

(If more than one well, please list each separately.)

If system has fire hydrants, what is the fire flow requirement? N/A GPM for ____ hrs

If system has chlorination treatment, does this treatment system chlorinate continuously?

☒ Yes ☐ No

Is the Water Utility located in an ADWR Active Management Area (AMA)?

☐ Yes ☒ No

Does the Company have an ADWR Gallons Per Capita Per Day (GPCPD) requirement?

☐ Yes ☒ No

If yes, provide the GPCPD amount: _____

Note: If you are filing for more than one system, please provide separate data sheets for each system.

COMPANY NAME: Aubrey Water Company	
Name of System:	ADEQ Public Water System Number: 13-010

UTILITY SHUTOFFS / DISCONNECTS

MONTH		Termination without Notice R14-2-410.B	Termination with Notice R14-2-410.C	OTHER
JANUARY			0	
FEBRUARY			0	
MARCH			0	
APRIL			0	
MAY			3	
JUNE			3	
JULY			1	
AUGUST			0	
SEPTEMBER			2	
OCTOBER			1	
NOVEMBER			2	
DECEMBER			2	
TOTALS →			14	

OTHER (description):

COMPANY NAME Aubrey Water Company YEAR ENDING 12/31/2010

PROPERTY TAXES

Amount of actual property taxes paid during Calendar Year 2010 was: \$ 5,942.92

Attach to this annual report proof (e.g. property tax bills stamped "paid in full" or copies of cancelled checks for property tax payments) of any and all property taxes paid during the calendar year.

If no property taxes paid, explain why. _____

**VERIFICATION
AND
SWORN STATEMENT**
Taxes

RECEIVED
MAY 08 2011
ACC UTILITIES DIRECTOR

VERIFICATION

STATE OF ARIZONA
I, THE UNDERSIGNED
OF THE

COUNTY OF (COUNTY NAME)	<u>YAVAPAI</u>
NAME (OWNER OR OFFICIAL) TITLE	<u>MARK UDE VICE PRESIDENT AND ASST SECRETARY</u>
COMPANY NAME	<u>BN Leasing Corporation d/b/a AUBREY WATER COMPANY</u>

DO SAY THAT THIS ANNUAL UTILITY PROPERTY TAX AND SALES TAX REPORT TO THE ARIZONA CORPORATION COMMISSION

FOR THE YEAR ENDING

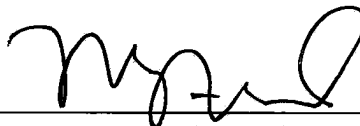
MONTH	DAY	YEAR
<u>12</u>	<u>31</u>	<u>2010</u>

HAS BEEN PREPARED UNDER MY DIRECTION, FROM THE ORIGINAL BOOKS, PAPERS AND RECORDS OF SAID UTILITY; THAT I HAVE CAREFULLY EXAMINED THE SAME, AND DECLARE THE SAME TO BE A COMPLETE AND CORRECT STATEMENT OF BUSINESS AND AFFAIRS OF SAID UTILITY FOR THE PERIOD COVERED BY THIS REPORT IN RESPECT TO EACH AND EVERY MATTER AND THING SET FORTH, TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.

SWORN STATEMENT

I HEREBY ATTEST THAT ALL PROPERTY TAXES FOR SAID COMPANY ARE CURRENT AND PAID IN FULL.

I HEREBY ATTEST THAT ALL SALES TAXES FOR SAID COMPANY ARE CURRENT AND PAID IN FULL.



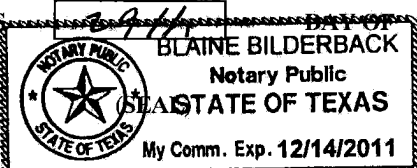
SIGNATURE OF OWNER OR OFFICIAL
817-352-6470

TELEPHONE NUMBER

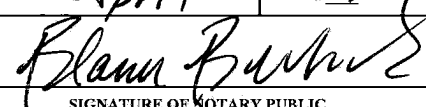
SUBSCRIBED AND SWORN TO BEFORE ME

A NOTARY PUBLIC IN AND FOR THE COUNTY OF

THIS



MY COMMISSION EXPIRES

COUNTY NAME	<u>TARRANT</u>	
MONTH	<u>April</u>	<u>2011</u>
 _____ SIGNATURE OF NOTARY PUBLIC		

COMPANY NAME Aubrey Water Company YEAR ENDING 12/31/2010

INCOME TAXES

For this reporting period, provide the following:

Federal Taxable Income Reported None
Estimated or Actual Federal Tax Liability None

State Taxable Income Reported None
Estimated or Actual State Tax Liability None

Amount of Grossed-Up Contributions/Advances:

Amount of Contributions/Advances None
Amount of Gross-Up Tax Collected None
Total Grossed-Up Contributions/Advances None

Decision No. 55774 states, in part, that the utility will refund any excess gross-up funds collected at the close of the tax year when tax returns are completed. Pursuant to this Decision, if gross-up tax refunds are due to any Payer or if any gross-up tax refunds have already been made, attach the following information by Payer: name and amount of contribution/advance, the amount of gross-up tax collected, the amount of refund due to each Payer, and the date the Utility expects to make or has made the refund to the Payer.

CERTIFICATION

The undersigned hereby certifies that the Utility has refunded to Payers all gross-up tax refunds reported in the prior year's annual report. This certification is to be signed by the President or Chief Executive Officer, if a corporation; the managing general partner, if a partnership; the managing member, if a limited liability company or the sole proprietor, if a sole proprietorship.



SIGNATURE

APRIL 29, 2011

DATE

MARK UDE

PRINTED NAME

VP and ASST SECRETARY

TITLE

**VERIFICATION
AND
SWORN STATEMENT
Intrastate Revenues Only**

RECEIVED
MAY 22 2011
ACC UTILITIES DIRECTOR

VERIFICATION

STATE OF ARIZONA

I, THE UNDERSIGNED

OF THE

COUNTY OF (COUNTY NAME) <u>YAVAPAI</u>
NAME (OWNER OR OFFICIAL) TITLE <u>MARK UDE VP and ASST SECRETARY</u>
COMPANY NAME <u>BN Leasing Corporation d/b/a AUBREY WATER COMPANY</u>

DO SAY THAT THIS ANNUAL UTILITY REPORT TO THE ARIZONA CORPORATION COMMISSION

FOR THE YEAR ENDING

MONTH	DAY	YEAR
<u>12</u>	<u>31</u>	<u>2010</u>

HAS BEEN PREPARED UNDER MY DIRECTION, FROM THE ORIGINAL BOOKS, PAPERS AND RECORDS OF SAID UTILITY; THAT I HAVE CAREFULLY EXAMINED THE SAME, AND DECLARE THE SAME TO BE A COMPLETE AND CORRECT STATEMENT OF BUSINESS AND AFFAIRS OF SAID UTILITY FOR THE PERIOD COVERED BY THIS REPORT IN RESPECT TO EACH AND EVERY MATTER AND THING SET FORTH, TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.


SWORN STATEMENT

IN ACCORDANCE WITH THE REQUIREMENT OF TITLE 40, ARTICLE 8, SECTION 40-401, ARIZONA REVISED STATUTES, IT IS HEREIN REPORTED THAT THE GROSS OPERATING REVENUE OF SAID UTILITY DERIVED FROM ARIZONA INTRASTATE UTILITY OPERATIONS DURING CALENDAR YEAR 2010 WAS:

Arizona Intrastate Gross Operating Revenues Only (\$)
\$ <u>181,208.91</u>

(THE AMOUNT IN BOX ABOVE
INCLUDES \$ 10,057.91
IN SALES TAXES BILLED, OR COLLECTED)

****REVENUE REPORTED ON THIS PAGE MUST INCLUDE SALES TAXES BILLED OR COLLECTED. IF FOR ANY OTHER REASON, THE REVENUE REPORTED ABOVE DOES NOT AGREE WITH TOTAL OPERATING REVENUES ELSEWHERE REPORTED, ATTACH THOSE STATEMENTS THAT RECONCILE THE DIFFERENCE. (EXPLAIN IN DETAIL)**



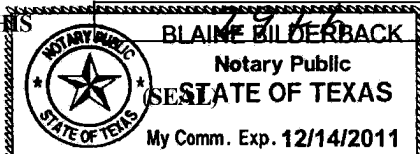
SIGNATURE OF OWNER OR OFFICIAL
817-352-6470

TELEPHONE NUMBER


SUBSCRIBED AND SWORN TO BEFORE ME

A NOTARY PUBLIC IN AND FOR THE COUNTY OF

THIS 12 DAY OF



COUNTY NAME	<u>TARRANT</u>	
MONTH	<u>April</u>	<u>2011</u>



SIGNATURE OF NOTARY PUBLIC

MY COMMISSION EXPIRES

**VERIFICATION
AND
SWORN STATEMENT
RESIDENTIAL REVENUE**
Intrastate Revenues Only

RECEIVED
MAY 02 2011
ACC UTILITIES DIRECTOR

VERIFICATION

STATE OF ARIZONA

I, THE UNDERSIGNED

OF THE

COUNTY OF (COUNTY NAME) <u>YAVAPAI</u>	
NAME (OWNER OR OFFICIAL) <u>MARK UDE</u>	TITLE <u>VP and ASST SECRETARY</u>
COMPANY NAME <u>BN Leasing Corporation d/b/a AUBREY WATER COMPANY</u>	

DO SAY THAT THIS ANNUAL UTILITY REPORT TO THE ARIZONA CORPORATION COMMISSION

FOR THE YEAR ENDING

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<u>12</u>	<u>31</u>	<u>2010</u>

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SWORN STATEMENT

IN ACCORDANCE WITH THE REQUIREMENTS OF TITLE 40, ARTICLE 8, SECTION 40-401.01, ARIZONA REVISED STATUTES, IT IS HEREIN REPORTED THAT THE GROSS OPERATING REVENUE OF SAID UTILITY DERIVED FROM ARIZONA INTRASTATE UTILITY OPERATIONS RECEIVED FROM RESIDENTIAL CUSTOMERS DURING CALENDAR YEAR 2010 WAS:

ARIZONA INTRASTATE GROSS OPERATING REVENUES

\$ 101,467.96

THE AMOUNT IN BOX AT LEFT

INCLUDES \$ 6,395.56

IN SALES TAXES BILLED, OR COLLECTED)

*RESIDENTIAL REVENUE REPORTED ON THIS PAGE
MUST INCLUDE SALES TAXES BILLED.

[Signature]
SIGNATURE OF OWNER OR OFFICIAL
817-352-6470
TELEPHONE NUMBER

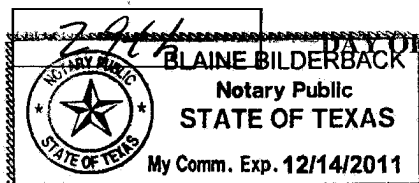
SUBSCRIBED AND SWORN TO BEFORE ME

A NOTARY PUBLIC IN AND FOR THE COUNTY OF

THIS

(SEAL)

MY COMMISSION EXPIRES



NOTARY PUBLIC NAME <u>Tarrant</u>	
COUNTY NAME	
MONTH <u>April</u>	, 20 <u>11</u>

[Signature]
SIGNATURE OF NOTARY PUBLIC